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UTILITY PATENT APPLICATION TRANSMITTAL

Attori	ney Docket No.		
First i	Inventor	ALLISON "A	EBONNETTSR
Title	CYBERMONE	EV NETWOK BANK XCCOUN	K:SEAMLESS IT INTERFACE
_	14 4 4 - C - L A		29 EN 50116

(Only for new nonprovisional applications under 37 CFR 1.53(b)) Express Wall Label No.   E7 3275 (303243)					
	TION ELEMENTS	Assistant Commissioner for Patents Box Patent Application			
See MPEP chapter 600 concerning utility patent application contents. Washington, DC 20231					
	rm (e.g., PTO/SB/17)	7. CD-ROM or CD-R in duplicate, large table or			
2. Applicant claims sn See 37 CFR 1.27.	nall entity status.	8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)  a. Computer Readable Form (CRF)			
Specification	pecification [Total Pages /6]]  a. Computer Readable Form (CRF)				
- Descriptive title		b. Specification Sequence Listing on:			
- Cross Reference	to Related Applications rding Fed sponsored R & D	i. CD-ROM or CD-R (2 copies); or			
- Reference to sec	quence listing, a table,	ii. paper			
	ogram listing appendix	· — · ·			
- Background of t		c. Statements verifying identity of above copies			
- Brief Summary	of the Invention	ACCOMPANYING APPLICATION PARTS			
	n of the Drawings (if filed)				
- Detailed Descrip	otion				
- Claim(s) - Abstract of the	Disclosure	10. 37 CFR 3.73(b) Statement Power of Attorney			
	1	(when there is an assignee) Attorney  11. English Translation Document (if applicable)			
4. X Drawing(s) (35 U.	S.C. 113) [ Total Sheets 7	Information Disclosure Copies of IDS			
[37]	ited (original or copy)	Statement (IDS)/PTO-1449 Citations  13. Preliminary Amendment			
Copy from a	prior application (37 CFR 1.63 (d))	Return Receipt Postcard (MPEP 503)			
b. (for continuation/divisional with Box 18 completed) (Should be specifically itemized)					
	ION OF INVENTOR(S) tement attached deleting inventor(s)	15. Certified Copy of Priority Document(s) (if foreign priority is claimed)			
parmed in the prior application, see 37 CFR Action Request and Certification under 35 U.S.C. 122					
1.63(d)(2)	and 1.33(b).	(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.			
6. Application Data	Sheet. See 37 CFR 1.76	17. Other:			
		described as a sociate information holowand in a proliminary amendment			
18. If a CONTINUING APPLI	CATION, check appropriate box, and	d supply the requisite information below and in a preliminary amendment,			
or in an Application Data She		(CIT)			
Continuation	Divisional Continuation-in-part	1			
Prior application information:	Examiner	Group Art Unit:			
For CONTINUATION OR DIVIS	IONAL APPS only: The entire disclosure	e of the prior application, from which an oath or declaration is supplied under continuation or divisional application and is hereby incorporated by reference.			
The incorporation can only be	relied upon when a portion has been in	nadvertently omitted from the submitted application parts.			
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		SVITE 100, 200M 266			
Autor					
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City	CHICAGO	State ILLINOLS Zip Code 60605			
Country	USA	Telephone (30)939-7684 Fax (30)939-76			
Name (Print/Type)	ALLISON "DEBONNETT	T 5R. Registration No. (Attorney/Agent)			
11/20/00					
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for FY 2001

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TOTAL AMOUNT OF PAYMENT

Complete if Known			
Application Number		81	
Filing Date	NOVEMBER 30, 2000	JC	
First Named Inventor	ALLISON DEBONNETT JR		
Examiner Name			
Group Art Unit			
Attorney Docket No.			

METHOD OF PAYMENT FEE CALCULATION (contin	iuea)			
1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:  3. ADDITIONAL FEES  Large Small				
Deposit Entity Entity				
Account Number Fee Fee Fee Fee Fee Description Code (\$) Code (\$)	Fee Paid			
Deposit Account Name  105 130 205 65 Surcharge - late filing fee or oath	ı			
Charge Any Additional Fee Required 127 50 227 25 Surcharge - late provisional filing cover sheet	fee or			
Under 37 CFR 1 16 and 1.17  Applicant claims small entity status.  139 130 139 130 Non-English specification				
147 2,520 For filling a request for ex parte re	eexamination			
2. X Payment Enclosed:    112 920* 112 920* Requesting publication of SIR print Check   Credit card   Money   Other   Check   Credit card   Other   Other   Check   Credit card   Other   Othe	ior to			
FEE CALCULATION  Order Content of SIR af Examiner action	ter			
115 110 215 55 Extension for reply within first m	ionth			
1. BASIC FILING FEE Large Entity Small Entity  116 390 216 195 Extension for reply within second	d month			
Fee Fee Fee Fee Description 117 890 217 445 Extension for reply within third m	nonth			
Code (\$) Code (\$)  Fee Paid  118 1,390 218 695 Extension for reply within fourth	month			
101 710 201 355 Utility filing fee  106 320 206 160 Design filing fee  128 1,890 228 945 Extension for reply within fifth m	onth			
110 320 200 ToV Design unity see				
107 490 207 245 Plant filing fee 113 310 220 155 Fliing a brief in support of an app	peal			
114 150 214 75 Provisional filling fee 121 270 221 135 Request for oral hearing				
138 1,510 138 1,510 Petition to Institute a public use	proceeding			
SUBTOTAL (1) (\$) 355   140 110 240 55 Petition to revive - unavoidable				
2. EXTRA CLAIM FEES 141 1,240 241 620 Petition to revive - unintentional				
Fee from Extra Claims below Fee Paid 142 1,240 242 620 Utility issue fee (or reissue)				
Total Claims				
Independent 5 - 3**.= 2 X 40 = 70 144 600 244 300 Plant issue fee				
Multiple Dependent Dependent 122 130 122 130 Petitions to the Commissioner				
123 50 123 50 Processing fee under 37 CFR 1	.17(q)			
Large Entity Small Entity Fee Fee Fee Fee Gescription 126 180 126 180 Submission of Information Discl	osure Strnt			
Code (\$) Code (\$)  103 18 203 9 Claims in excess of 20  581 40 581 40 Recording each patent assignm property (times number of property)	ent per erties)			
102 80 202 40 Independent claims in excess of 3 146 710 246 355 Filling a submission after final re	ejection			
104 270 204 135 Multiple dependent claim, if not paid 149 710 249 355 For each additional invention to	) be			
109 80 209 40 ** Reissue independent claims examined (37 CFR § 1.129(b)) over original patent				
110 18 210 9 ** Reissue claims in excess of 20 179 710 279 355 Request for Continued Examina	ition (RCE)			
and over original patent 169 900 169 900 Request for expedited examina of a design application	tion			
SUBTOTAL (2) (\$) 80 Other fee (specify)	Las			
**or number previously paid, if greater, For Reissues, see above *Reduced by Basic Filing Fee Paid *SUBTOTAL	(3) (\$)			

SUBMITTED BY	Complete (if applicable)			
Name (Prini/Type)	ALLISON DEBONNETT JA Registration No (Attorney/Agent)	Telephone	(34) 93	9-7684
Signature	0	Date	11/30	100

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